

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)

00051064

2 Total pages this report:

1/21

3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI Enrique		OFFICE USE ONLY	
	NICKNAME LAST SUFFIX Mike Martin			
4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 8327 Staton Dr. San Antonio TX 78224		Date Received	
			Date Hand-delivered or Date Postmarked	
5 CAMPAIGN TREASURER NAME	TITLE FIRST MI LTC (Ret) Tommie		Receipt # Amount	
	NICKNAME LAST SUFFIX Malone		Date Processed	
			Date Imaged	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2202 Cypress Pearl San Antonio TX 78232			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION () -			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)			
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 04/26/2001 05/19/2001			
10 ELECTION	ELECTION DATE Month Day Year 05/29/2001		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)	
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...			
	Name			
	Address/PO Box; Apt. / Suite #; City; State; Zip Code			

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2**RECEIVED
CITY OF SAN ANTONIO
CITY CLERK**14 C/OH NAME**
Enrique Martin**15 ACCOUNT #** (Ethics Commission filers)
00051484**16 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

.. This listing includes political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE**COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****17 NO REPORTABLE
ACTIVITY**☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)**18 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 22150.00

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0.00

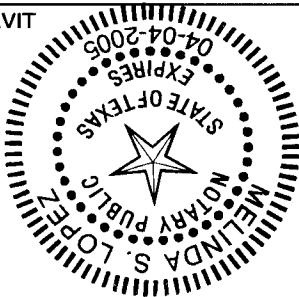
4. TOTAL POLITICAL EXPENDITURES

\$ 17281.07

**OUTSTANDING
LOAN TOTALS**

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0.00

19 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Enrique Martin
this the 21st day of May 2001, to certify which, witness my
hand and seal of office.

Melinda S. Lopez
Signature of officer administering oath

Melinda S. Lopez
Printed

(Effective 11/16/1999)
Notary Public
Title

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

 RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report:

2001 MAY 21 P 4:39

2 FILER NAME

Enrique Martin

3 ACCOUNT # (Ethics Commission files)

00051464

4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Associated General Contractors of America	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
05/18/2001	6 Contributor address; City; State; Zip Code 10306 Gulfdale San Antonio TX 78216	500.00	

9 Principal occupation (Optional)	10 Employer (Optional)
--	-------------------------------

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James Bastoni	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/17/2001	Contributor address; City; State; Zip Code 106 Ottawa Run San Antonio TX 78231	1000.00	

Principal occupation (Optional)	Employer (Optional)
---------------------------------	---------------------

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Roger D. Bowler	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/17/2001	Contributor address; City; State; Zip Code 311 Mayer Bulverde TX 78163	250.00	

Principal occupation (Optional)	Employer (Optional)
---------------------------------	---------------------

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Alfonso Chiscano	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/09/2001	Contributor address; City; State; Zip Code 4330 Medical Drive San Antonio TX 78229	100.00	

Principal occupation (Optional)	Employer (Optional)
---------------------------------	---------------------

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Dennis Elmore	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/17/2001	Contributor address; City; State; Zip Code 1559 Yosemite Oaks Circle San Antonio TX 78213	250.00	

Principal occupation (Optional)	Employer (Optional)
---------------------------------	---------------------

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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1 Total pages this report:

2001 MAY 21 P 4: 38

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission filers)

00051464

4 Date 5 Full name of contributor ☐ out-of-state PAC(ID# _____)

Pablo Escamilla

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

05/17/2001

6 Contributor address; City; State; Zip Code
1726 Valencia

San Antonio TX 78237

9 Principal occupation (Optional)

10 Employer (Optional)

Date

Full name of contributor ☐ out-of-state PAC(ID# _____)

Buddy Ford

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

05/18/2001

Contributor address; City; State; Zip Code
825 E. Locust St.

San Antonio TX 78212

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor ☐ out-of-state PAC(ID# _____)

G. Hasslocher

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

05/10/2001

Contributor address; City; State; Zip Code
8520 Crownhill Blvd.

San Antonio TX 78209

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor ☐ out-of-state PAC(ID# _____)

James & Jordon Hasslocher

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

05/10/2001

Contributor address; City; State; Zip Code
129 Haskin

San Antonio TX 78209

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor ☐ out-of-state PAC(ID# _____)

Heard, Lindburger, Graham, Blair, Pena & Sampson, LLP

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

05/17/2001

Contributor address; City; State; Zip Code
1019 Tower Life Bldg.

San Antonio TX 78205

Principal occupation (Optional)

Employer (Optional)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1

(FOR FORMS C/OH & SPAC)

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CITY CLERK

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1 Total pages this report:

2001 MAY 21 P 4/29

2 FILER NAME Enrique Martin		3 ACCOUNT # (Ethics Commission filers) 00051464	
4 Date 05/09/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) I.B.E.W. - C.O.P.E. <hr/> 6 Contributor address; City; State; Zip Code 1125 15th Street,N.W. Washington DC 20005	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 05/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) I.B.E.W. - C.O.P.E. <hr/> Contributor address; City; State; Zip Code 1125 15th Street,N.W. Washington DC 20005	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 05/10/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) John Kell,Jr. <hr/> Contributor address; City; State; Zip Code 2635 Brookhurst Dr. San Antonio TX 78209	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 05/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Martin,Drought & Torres Attorney's <hr/> Contributor address; City; State; Zip Code Bank of America Plaza,25th Flr. Convent St. San Antonio TX 78205	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 05/10/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Clifford Morton <hr/> Contributor address; City; State; Zip Code 1919 Oakwell Farms Pkwy San Antonio TX	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A 1
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2001 MAY 21

1 Total pages in this report:
6/21

2 FILER NAME Enrique Martin		3 ACCOUNT # (Ethics Commission filers) 00051464	
4 Date 05/17/2001	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) PEA International - US 6 Contributor address; City; State; Zip Code 1313 L. Street,NW Washington DC 20005	7 Amount of contribution (\$) 5000.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 05/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Douglas Poneck Contributor address; City; State; Zip Code 127 W. Woodlawn San Antonio TX 78212	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 05/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Professional Vending Contributor address; City; State; Zip Code 1111 Vista Valet,#705 San Antonio TX 78216	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 05/17/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Thomas Reedy Contributor address; City; State; Zip Code 201 N. Presa San Antonio TX 78205	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 05/10/2001	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) San Antonio Police Officers Association PAC Contributor address; City; State; Zip Code 1939 N.E. Loop 410,#230 San Antonio TX 78217	Amount of contribution (\$) 5000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2001 MAY 21 P 4:39

1 Total pages this report:
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2 FILER NAME

Enrique Martin

3 ACCOUNT # (Ethics Commission files)

00051464

4 Date

05/10/2001

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Baltazar Serna,Jr.

6 Contributor address; City; State; Zip Code
72 Sendero Verde

San Antonio TX 78261

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

05/10/2001

Full name of contributor ☐ out-of-state PAC(ID# _____)
Rich Sheldon

Contributor address; City; State; Zip Code
4006 Green Oak Dr.

Waco TX 76710

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

05/09/2001

Full name of contributor ☐ out-of-state PAC(ID# _____)
Ultramar Diamond Shamrock Employees PAC

Contributor address; City; State; Zip Code
P.O. Box 696000

San Antonio TX 78269-6000

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

05/17/2001

Full name of contributor ☐ out-of-state PAC(ID# _____)
Darolyn Worth

Contributor address; City; State; Zip Code
6929 Camp Bullis Rd.

San Antonio TX 78256

Amount of contribution (\$)

1500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

POLITICAL EXPENDITURES

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SCHEDULE F

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2001 MAY

1 Total pages reported
218/21**2 FILER NAME**

Enrique Martin

3 ACCOUNT # (Ethics Commission filers)

00051464

4 Date

05/19/2001

5 Payee name

Albertson's

7 Amount

(\$)

53.67

6 Payee address; City; State; Zip Code

San Antonio TX

8 Purpose of expenditure (See instructions regarding type of information required.)

Refreshments

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/05/2001

Payee name

Henry Avila

Amount

(\$)

220.00

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Election Support

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/09/2001

Payee name

Augustine Beltran

Amount

(\$)

1896.00

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Block Walkers

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/14/2001

Payee name

Augustine Beltran

Amount

(\$)

640.00

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Block Walkers

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

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Total pages report:

9/21

2001 MAY 21 P 4:40
3 ACCOUNT # (Ethics Commission filers)
00051464

2 FILER NAME

Enrique Martin

4 Date

05/18/2001

5 Payee name

Augustine Beltran

7

Amount

(\$)

1268.00

6 Payee address; City; State; Zip Code

San Antonio TX

8 Purpose of expenditure (See instructions regarding type of information required.)

Election Support

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/29/2001

Payee name

Bros. Printing

Amount

(\$)

635.84

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

T-Shirts

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/11/2001

Payee name

CPS

Amount

(\$)

115.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)

Electricity for Headquarters

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/11/2001

Payee name

Cingular Wireless

Amount

(\$)

265.12

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Cellular Service

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

The INSTRUCTION GUIDE explains how to complete this form.

2001 MAY 21

1 Total pages report:
P 14240**2 FILER NAME**

Enrique Martin

3 ACCOUNT # (Ethics Commission filers)
00051464**4 Date**

05/03/2001

5 Payee name

John Delgado

7 Amount

(\$)

100.00

6 Payee address; City; State; Zip Code

TX

8 Purpose of expenditure (See instructions regarding type of information required.)

Election Support

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/11/2001

Payee name

Diamond Shamrock

Amount

(\$)

28.22

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)

Refreshments

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/13/2001

Payee name

Diamond Shamrock

Amount

(\$)

29.92

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)

Refreshments

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/15/2001

Payee name

Diamond Shamrock

Amount

(\$)

37.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)

Refreshments

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

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The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:

2001 MAY 21 P 4:14

2 FILER NAME

Enrique Martin

3 ACCOUNT # (Ethics Commission filers)

00051464

4 Date

05/16/2001

5 Payee name

Diamond Shamrock

7 Amount

(\$)

19.63

6 Payee address; City; State; Zip Code

TX

8 Purpose of expenditure (See instructions regarding type of information required.)

Refreshments

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/14/2001

Payee name

Elections Support Services

Amount

(\$)

28.69

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)

Labels

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/16/2001

Payee name

Elections Support Services

Amount

(\$)

1284.07

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)

Labels

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/18/2001

Payee name

Elections Support Services

Amount

(\$)

891.54

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)

Mail Services

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES

RECEIVED
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SCHEDULE F

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2001 MAY 21

Total pages report:
12/40**2 FILER NAME**

Enrique Martin

3 ACCOUNT # (Ethics Commission filers)

00051464

4 Date 05/17/2001	5 Payee name Enterprise	7 Amount (\$) 180.48
6 Payee address; City; State; Zip Code San Antonio TX		

8 Purpose of expenditure (See instructions regarding type of information required.)
Car Rental

9 Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date 05/14/2001	Payee name Tom Fasome	Amount (\$) 500.00
Payee address; City; State; Zip Code San Antonio TX		

Purpose of expenditure (See instructions regarding type of information required.)
Headquarters Rental

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date 04/29/2001	Payee name Flying Times	Amount (\$) 198.00
Payee address; City; State; Zip Code San Antonio TX		

Purpose of expenditure (See instructions regarding type of information required.)
Advertisement

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date 05/19/2001	Payee name Flying Times	Amount (\$) 153.00
Payee address; City; State; Zip Code San Antonio TX		

Purpose of expenditure (See instructions regarding type of information required.)
Advertisement

Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

RECEIVED
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SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

2001 MAY 21 P 14:10
Total pages report:
13/21

2 FILER NAME

Enrique Martin

3 ACCOUNT # (Ethics Commission filers)

00051464

4 Date

05/18/2001

5 Payee name

Garza's Food Market

7 Amount

(\$)

57.80

6 Payee address; City; State; Zip Code

TX

8 Purpose of expenditure (See instructions regarding type of information required.)

Refreshments

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/18/2001

Payee name

Robert Garza

Amount

(\$)

300.00

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Election Support Services

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/18/2001

Payee name

Robert Garza

Amount

(\$)

175.00

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Election Support Services

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/02/2001

Payee name

Rudy Garza

Amount

(\$)

400.00

Payee address; City; State; Zip Code

San Antoni TX

Purpose of expenditure (See instructions regarding type of information required.)

Electrical Supplies

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES

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SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

2001 MAY 21 12:40
Total pages report:
14/21

2 FILER NAME

Enrique Martin

3 ACCOUNT # (Ethics Commission filers)

00051464

4 Date 05/05/2001	5 Payee name Rudy Garza 6 Payee address; City; State; Zip Code San Antonio TX	7 Amount (\$) 350.00
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8 Purpose of expenditure (See instructions regarding type of information required.) Electrical Service	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 04/29/2001	Payee name Cynthia Gonzales Payee address; City; State; Zip Code San Antonio TX	Amount (\$) 300.00
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Purpose of expenditure (See instructions regarding type of information required.) Election Support	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 05/18/2001	Payee name Monica Gutierrez Payee address; City; State; Zip Code San Antonio TX	Amount (\$) 275.00
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Purpose of expenditure (See instructions regarding type of information required.) Election Support Services	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	--

Date 04/29/2001	Payee name HEB Payee address; City; State; Zip Code San Antonio TX	Amount (\$) 101.00
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Purpose of expenditure (See instructions regarding type of information required.) Refreshments	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES**SCHEDULE F**

RECEIVED
CITY OF SAN ANTONIO
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The INSTRUCTION GUIDE explains how to complete this form.

Total pages report:
15/21

2 FILER NAME
Enrique Martin

2001 MAY 21

3 ACCOUNT # (Ethics Commission filers)
00051464

4 Date 05/11/2001	5 Payee name Home Depot	7 Amount (\$) 21.09
6 Payee address; City; State; Zip Code TX		

8 Purpose of expenditure (See instructions regarding type of information required.) Materials	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date 05/15/2001	Payee name Home Depot	Amount (\$) 173.94
Payee address; City; State; Zip Code TX		

Purpose of expenditure (See instructions regarding type of information required.) Materials	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 05/18/2001	Payee name Home Depot	Amount (\$) 48.47
Payee address; City; State; Zip Code TX		

Purpose of expenditure (See instructions regarding type of information required.) Materials	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date 05/05/2001	Payee name Tim Huizar	Amount (\$) 200.00
Payee address; City; State; Zip Code San Antonio TX		

Purpose of expenditure (See instructions regarding type of information required.) Election Support	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES**SCHEDULE F**

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

The INSTRUCTION GUIDE explains how to complete this form.

2001 MAY 2

1 Total pages report:

16/21
5:40

2 FILER NAME
Enrique Martin

3 ACCOUNT # (Ethics Commission filers)
00051464

4 Date 05/01/2001	5 Payee name John Lambert	7 Amount (\$) 250.00
6 Payee address; City; State; Zip Code San Antonio TX		

8 Purpose of expenditure (See instructions regarding type of information required.) Election Support	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 05/15/2001	Payee name John Lambert	Amount (\$) 125.00
Payee address; City; State; Zip Code San Antonio TX		

Purpose of expenditure (See instructions regarding type of information required.) Election Support	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 05/04/2001	Payee name Little Ceasars	Amount (\$) 32.68
Payee address; City; State; Zip Code San Antonio TX		

Purpose of expenditure (See instructions regarding type of information required.) Refreshments	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 05/15/2001	Payee name Little Ceasars	Amount (\$) 18.76
Payee address; City; State; Zip Code San Antonio TX		

Purpose of expenditure (See instructions regarding type of information required.) Refreshments	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

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SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

2001 MAY 21

14-110
Total pages report:
17/21

2 FILER NAME

Enrique Martin

3 ACCOUNT # (Ethics Commission files)

00051464

4 Date

05/05/2001

5 Payee name

Rejino Longoria

7 Amount

(\$)

195.00

6 Payee address; City; State; Zip Code

San Antonio TX

8 Purpose of expenditure (See instructions regarding type of information required.)

D.J. Music

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/18/2001

Payee name

Lopez Automotive

Amount

(\$)

483.57

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Donation

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/04/2001

Payee name

Marina Lopez

Amount

(\$)

30.00

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Election Support

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/14/2001

Payee name

Marina Lopez

Amount

(\$)

45.00

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Election Support

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES

RECEIVED
CITY OF SAN ANTONIO
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SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

2001 MAY 21

1 Total pages report:
18/21 40**2 FILER NAME**

Enrique Martin

3 ACCOUNT # (Ethics Commission filers)

00051464

4 Date

04/29/2001

5 Payee name

Azannette Martin

7 Amount

(\$)

214.32

6 Payee address; City; State; Zip Code

San Antonio TX

8 Purpose of expenditure (See instructions regarding type of information required.)

Reimbursement for supplies

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/14/2001

Payee name

Azannette Martin

Amount

(\$)

215.73

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Reimbursement

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/18/2001

Payee name

Edward Metz

Amount

(\$)

500.00

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Election Support Services

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/26/2001

Payee name

Munguia Printers

Amount

(\$)

430.85

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Printing

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

RECEIVED
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The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:

2001 MAY 21 10:40

2 FILER NAME

Enrique Martin

3 ACCOUNT # (Ethics Commission filers)

00051464

4 Date

05/11/2001

5 Payee name

Munguia Printers

7 Amount(\$)
239.34**6** Payee address; City; State; Zip Code

San Antonio TX

8 Purpose of expenditure (See instructions regarding type of information required.)

Printing

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

05/15/2001

Payee name

Munguia Printers

Amount

(\$)
1557.38

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Printing

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

05/16/2001

Payee name

Munguia Printers

Amount

(\$)
480.70

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Printing

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

05/11/2001

Payee name

R&R Flowers

Amount

(\$)
375.00

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Flowers

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

RECEIVED
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CITY CLERK

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

2001 MAY 21 P 4:40

Total pages report:
20/21**2 FILER NAME**

Enrique Martin

3 ACCOUNT # (Ethics Commission filers)

00051464

4 Date

05/17/2001

5 Payee name

Connie Sonnen

7 Amount

(\$)

75.00

6 Payee address; City; State; Zip Code

San Antonio TX

8 Purpose of expenditure (See instructions regarding type of information required.)

Election Services

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/01/2001

Payee name

Southside Reporter

Amount

(\$)

375.36

Payee address; City; State; Zip Code

San Antonio TX

Purpose of expenditure (See instructions regarding type of information required.)

Advertisement

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/15/2001

Payee name

U.S. Postmaster

Amount

(\$)

310.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)

Postage

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/16/2001

Payee name

U.S. Postmaster

Amount

(\$)

102.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)

Postage

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:

2001 MAY 21 2:14:10

3 ACCOUNT # (Ethics Commission filers)
00051464

2 FILER NAME Enrique Martin		
4 Date 05/16/2001	5 Payee name U.S. Postmaster 6 Payee address; City; State; Zip Code TX	7 Amount (\$) 128.90
8 Purpose of expenditure (See instructions regarding type of information required.) Postage		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/01/2001	Payee name United Care Payee address; City; State; Zip Code San Antonio TX	Amount (\$) 150.00
Purpose of expenditure (See instructions regarding type of information required.) Donation		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held